

RECREATION & WELFARE ASSOCIATION, INC.
National Institutes of Health

31 CENTER DRIVE MSC 2062
BUILDING 31, ROOM B1-W30
BETHESDA, MARYLAND 20892-2062
Telephone (301) 496-6061

**NIH Housing Listing Service
Complaint Guidelines**

1. Complaint

After a tenant/landlord makes a complaint to the Housing Listing Service, the complaining party is informed that the housing listing service does not resolve disputes between landlords and tenants.

2. Landlord/Tenant Mediation

We advise the complainant of the address and phone number of the Montgomery County Office of Landlord and Tenant Affairs:

100 Maryland Avenue
4th Floor
Rockville, MD 20850
(240) 777-3636

3. Confidentiality Policy

All information concerning any disputes shall be confidential and shall not be disclosed unless compelled by valid subpoena or court order.

4. Removal of Landlord from R&W Housing List

As stated in the NIH R&W Rental Listing application form "The R&W has the right to remove the landlord from the list at any time." When a landlord is removed from the NIH Housing Service, the landlord shall be notified by first class mail of the removal at least one week prior to the publication of the bi-weekly list.

Rental Listing Form

(\$5 fee per listing through August 1999 after September 1st the fee will increase to \$10)

PLEASE COMPLETE ALL ITEMS ENTERING ONLY THE INFORMATION REQUESTED. Each listing must be on a separate form.

Indicate below which listing you wish to use (check one only):

- ☐ **HOUSE OR APARTMENT TO SHARE**
☐ **HOUSE OR APARTMENT TO RENT**
☐ **ROOM FOR RENT IN PRIVATE RESIDENCE**

RENT PER MONTH (no ranges): \$ _____ **DATE AVAILABLE:** _____
LOCATION (city) _____ **DISTANCE TO NIH (in miles):** _____
CONTACT PERSON (name): _____ **PHONE #:** _____

PLEASE PRINT

NOTE: Numbers in parentheses are for housing office coding only.

YES	NO	FEATURES
		HOUSE (1)
		APARTMENT (2)
		FURNISHED (3)
		AIR CONDITIONED (4)
		NEAR PUBLIC TRANSPORTATION (5)
		WHEELCHAIR ACCESSIBILITY THROUGHOUT PROPERTY (6)
		SECURITY DEPOSIT REQUIRED (7)
		PRIVATE ENTRANCE (8)
		UTILITIES INCLUDED (9)
		SHORT-TERM RENTAL/LESS THAN 1 YEAR (10)
		MORE THAN ONE BEDROOM (11)
		LAUNDRY FACILITIES (12)

I CERTIFY THAT the above described property is available without regard to sex, race, religion, or national origin. I further certify that my property is in compliance with all state and county housing codes and requirements. R&W has the right to remove the landlord from this listing at any time.

SIGNATURE

DATE

If paying by MasterCard, Visa, or American Express, or Discover (Circle One):

Print Cardholder Name: _____ Signature: _____

Account Number: _____ Expiration Date: _____

Amount to be Charged: \$ _____ Daytime Phone: _____

This listing will be included on the next two printouts. An original signature is necessary in order to be included on the printout. Altered forms will not be processed. Properties must be resubmitted in order to run for additional printouts. Notify the NIH R&W on 496-4600 if you wish to remove your listing sooner.

MAIL FORM WITH CHECK OR MONEY ORDER TO: R&W, 9000 Wisconsin Ave., MSC 2062, Building 31, Room B1W30, Bethesda, MD 20892-2062. Fax number: 301-402-1052.

This form may not be used for sale, recreation or leisure, out-of-area, commercial/residential real estate, or management company property listings. Individuals are limited to (3) three listings per month.